

N120000000452

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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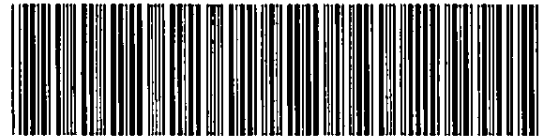
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: IT PRO CAMP, INC.
(Name of Corporation)

DOCUMENT NUMBER: N12 000000452

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALEX J. FUNKHOUSER
(Name of Person)

IT PRO CAMP, INC.
(Name of Firm/Company)

1666 JFK CAUSEWAY, SUITE 604
(Address)

NORTH BAY VILLAGE, FL 33141
(City/State and Zip Code)

For further information concerning this matter, please call:

ALEX J. FUNKHOUSER at (305) 458-5579
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, BLAIN BARTON, hereby resign as OFFICER
(Title)

of IT PRO CAMP, INC.
(Name of Corporation)

N12000000452, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Blain Barton
(Signature of resigning officer/director)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314